

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	8-2000	
O.I.P.E. CLASSIFIER	RSD		9/1/03
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		7/14/03	10/10

## INDEX OF CLAIMS

- ✓ ..... ✓
- = .....
- (Through numeral)... Canceled
- ÷ ..... Restricted

Rejected	N	Non-elected
Allowed	I	Interference
Canceled	A	Appeal
Restricted	O	Objected

Claim	Date
Final	
Original	
1	3-29-03
2	3-29-03
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Claim	Date
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99	3-29-03
100	3-29-03

Claim	Date
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If more than 150 claims or 10 actions  
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